COMPREHENSIVE VOCATIONAL REHABILITATION PLANNING

AN EVALUATION

SEPTEMBER 1969

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MINNEAPOLIS REHABILITATION CENTER, INC. 1900 CHICAGO AVENUE MINNEAPOLIS, MINNESOTA 55404

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TNTRODUCTION

The following is an evaluation of the final report of the comprehensive vocational rehabilitation planning effort as requested by the State of Minnesota State Planning Agency. That report will be referred to throughout this document as the "final report."

An attempt will be made to analyze the quality of the report as a whole, the planning effort which produced the report, the definition of problems, the specific recommendations made in the report and the recommended plan for implementation of the recommendations. Occasional reference will be made to the seven regional reports but major attention will be given to the statewide final report.

The Statement of Purpose and Scope of Program sections may describe the initial intent of the planning effort but the remainder of the report fails to deliver much of what was promised. The resources of the current system are nowhere evaluated and the collection of recommendations is not really a plan. The use of the phrase "all eligible persons" is inconsistent with the later statement that the scope of the study was very broad. One might well ask, "eligible for what?" Limiting consideration to people now technically eligible for one or more agencies' services assures that the system should continue serving the same kinds of people. Both immediate and long-range goals are promised but the recommendations rarely specify which they are.

One of the basic problems of the planning effort and subsequent report began just at this point of defining the purpose and scope. The stated intent of a very broad study and the lack of constraints for the effort resulted in attempting to evaluate and plan a very large system of programs and services in such detail that the resultant task became overwhelming and virtually impossible considering the time and resources available. Either a smaller segment of the overall system should have been studied in detail or the entire system in much more general terms. Basic issues were not defined and in fact were obscured by the tremendous effort expended on comparatively minor issues. Unfortunately, many agencies and programs listed as being within the scope of the study were not, indeed could not be, included. Some programs are never again mentioned in the report.

The evident frustration of the writers of the report trying to put together incompatible data, defining only a few of the many terms that need definition, consolidating a tremendous number of both very detailed and very broadly stated recommendations, and then trying to develop a truly comprehensive working plan, could all have been avoided had the scope been more limited.

CHAPTER TWO - THE PLANNING EFFORT

The tremendous number and range of people involved in this planning effort must be commended. Considerable care was taken to appoint concerned people to the many committees and task forces. The only shortcomings regarding who was involved concern two notable ommissions. First, there was inadequate involvement of past, present and potential future consumers of rehabilitation services. There were some attempts to solicit opinions and reactions of rehabilitation clients but these were limited and inconsistent. The report does not describe any serious attempt to include this group in the planning effort. Representatives of the several organizations of handicapped people are conspicuously absent from the lists of participants. Second, although there was token representation, key people from major governmental agencies such as the Department of Public Welfare, the Department of Corrections and the State Employment Service did not really participate to the extent that would have been desirable considering the broad scope of the effort.

Although the organization of committees and task forces appears to have been very comprehensive the wide range of actual recommendations from these various groups appears to be less a result of differences in needs in the different areas as it was due to inadequate direction and the lack of specific objectives provided to these groups. The specific recommendations of these groups, which will be discussed in a later section, could have been more consistently persuasive had the regional committees been given guidelines on how to present a recommendation. It is interesting to note that the section of the final report on "The Planning Organization" describes the functions of the various elements of the overall effort but doe3 not list objectives. The concern appears to have been more on the process of planning and securing involvement than it was focused on what would be a useful product of the planning effort.

The very structure of the committees added to the difficulty of integrating their assessment of problems and their recommendations. The assignment to separate committees' topics of physical disabilities, mental disabilities, facilities and workshops, manpower, etc. failed to recognize the interrelation between these issues. For example, it would be very difficult to plan for needed manpower and facilities until the more basic issues of just who the system should be serving, toward what goals, needing what services, and in what numbers, were decided upon. It appears that the committees were asked to begin work without an adequate foundation of information. Without an agreed upon set of basic assumptions or framework within which to operate, each committee member was free to cite problems and make recommendations consistent with his own understanding of the present system and his own ideas about what the system should actually be.

The statewide advisory committee was apparently divided into five subcommittees but the specific assignments to these committees and the results of their efforts are not included in the report. The reasoning behind this state committee division and the various regional committee divisions is not explained. It is interesting to note that each of the regional committees was asked to set up task forces of finance but this was not specifically assigned any subcommittee at the state level.

Some of the regional committees recognized these difficulties and changed their structure somewhat. The Central Region, for example, did not have a separate committee on finance but had each of its task forces estimate the costs of their recommendations. It was the only committee to do this. Three regional committees combined task forces on disability groups and the Southeast Region even surveyed opinions as to priorities for who should be served. The West Metropolitan Committee report contains some very interesting comments about planning which should have been available and considered for the statewide effort.

The five non-metropolitan Regional Citizen's Committees broke themselves down into similar Task Force topic areas. Some chose to combine certain areas but they rather consistently concerned themselves with the physically disabled, the mentally disabled, social disabilities, manpower, finance, facilities, and inter-agency coordination. The two metropolitan committees used very different breakdowns. The reasoning behind these differences which obviously made comparing and combining recommendations from the different committees more difficult was not provided in the report. Indeed, whatever rationale for, or problems necessitating dividing the Metropolitan planning into East and West as well as their very late beginnings in the effort should also have been explained.

The list of subcontractors and consultants indicates only very briefly why they were contracted and the products of these contracts are not consistently identified. The reasons for contracting individuals to develop recommendations and plans that were to have been developed by Regional Committees should have been explained.

In the section on "Method of Operation" it is not clear just how all the regional reports with their many recommendations were consolidated into the final draft of findings and recommendations. Many excellent recommendations from Regional Committees do not appear in the Final Report and it would be interesting to know if these were dropped by the "staff" or by the State Task Force and for what reasons. There is no mention of State Task Force or its Executive Committee either reviewing or approving either the Composite Working Plan, Chapter V, or "Continued Planning and Follow-Up, Chapter VI.

These several questions regarding authorship and approval of these various sections are raised because they affect the interpretation of the reader. Recommendations reviewed and approved by the State Task Force should be given more weight and consideration than those authored by one or two individuals and not approved by any such group. This is particularly important since so few of the recommendations are supported with sound documentation.

CHAPTER THREE - PROBLEM DEFINITION

One of the major deficits of the report is the absence of any clear statement of long range, i.e., 1975, objectives for the rehabilitation system. Without such a goal it is difficult to determine the gaps between what now exists and that goal. Consequently, the statements of problems or deficits in the current system are difficult to evaluate since the majority are based on the unspecified ideals or goals in the minds of a variety of unidentified people.

The section presenting data on prevalence and incidence of handicapped persons is probably the best section of the report in that the sources and limitations of the data are clearly presented.

No attempt was made, however, to summarize staffing, services, support to facilities, and other needs as suggested in the RSA guidelines.

The only presentation of problems is found in the section on "Findings and Recommendations" as part of the justification and documentation for individual recommendations. Consequently, this evaluation will review the reported problems in connection with reviewing the recommendations in the final report.

CHAPTER FOUR - RECOMMENDATIONS IN THE REPORT

The long list of recommendations is particularly unwieldy because they are presented in no consistent order either by topic or in terms of priority. The list appears to be a compilation of recommendations from regional committees, with some additions, changes and deletions. Most lack any statement of priority, estimated cost or suggested ways to accomplish implementation. Some relatively minor areas are covered by several very specific recommendations and other potential areas of concern received little or no attention.

The lack of integration of the recommendations leaves the reader overwhelmed. The RSA suggested outline for recommendations was not followed, perhaps because the committee structure made it difficult to focus attention on many of the important areas suggested in the guidelines. The lack of coverage of these areas more likely implies that they were not considered in the planning effort rather than indicating that no problems or deficits exist in these areas. For example, there are no findings and recommendations regarding older handicapped workers, economic opportunity programs, Social Security disability benefits applicants or recipients, and others which the guidelines specifically suggest should be considered.

The RSA guidelines are quite explicit regarding what should be included with each recommendation regarding documentation, priority statements, estimates of cost, relationship to current, interim and long range goals, etc. None of the over 80 recommendations follows these guidelines. Most frequently omitted are comments on priority, cost estimates, suggestions for responsibility and cross references to other related portions of the report or to other related recommendations. The net result is a patchwork of recommendations that is virtually impossible to evaluate as it now stands. Some recommendations are much too specific while others are highly general and vaguely stated.

Many of the recommendations could have been combined or consolidated. For example, recommendations #4 and #52 both are concerned with residential facilities for the handicapped. Some of the recommendations fail to relate to any stated problem. For example, recommendation #47 suggests that the state supplement the federal technical assistance program but does not say why, who needs this assistance nor what volume of such assistance might be needed. The recent substantial expansion of the federal program in this area may well fulfill this recommendation but this is difficult to determine without having more information as to the specific need the recommendation was designed to meet.

Many of the recommendations cover areas of legitimate concern but lack documentation of the problem and insufficient detail as to solution. Additional effort to develop this information would be necessary before any action could be taken. For example, recommendation #72 indicates a need for increasing stipends to rehabilitation students and extending their use to levels other than the Master's Degree. Not

provided, however, are any estimates of how many people per year should be included or how much of an increase in stipends would serve to attract people into the training. It is suggested in the supporting comments that professional organizations should develop this additional information. Indeed, because many recommendations lack this kind of specificity it would be difficult to determine what is needed in order to accomplish them, or, at a later date, to determine to what extent the recommendation was fulfilled.

For these many reasons it was not possible to make any defensible judgments on the recommendations. There simply is not enough information provided. Attempting to sort out the "good" ones from the "bad" ones would only be the expression of another opinion.

Chapter Four contains many recommendations that should receive additional attention but which are either too specific or need additional development before they could be implemented. Since the vast majority affect the Division of Vocational Rehabilitation it is suggested that the State Planning Agency urge DVR to assign various individuals on their administrative staff to work on these recommendations, develop additional supportive data, and develop detailed action plans. These plans could be sent to the State Planning Agency so they would know what happened to each recommendation. In addition, it is suggested that DVR and the State Planning Agency also provide feedback concerning what action will be taken with the recommendations to the many people who participated in this planning effort. This should not only strengthen DVR's ties with the community but it would maintain a communication channel which could continue to benefit DVR for the future.

Although there are many deficiencies in the way the recommendations are presented, many of them should be acted upon and it does not seem appropriate for the State Planning Agency to get involved in the detailed inner workings of DVR or other agencies. Those recommendations that would require significant policy change or legislation could be assigned to small joint committees made up of people from the State Planning Agency and DVR or whatever other agencies or organizations would be directly affected.

These committees could also make estimates of additional personnel or money that would be needed for implementation and then assign some order of priority to each recommendation. Obviously it would be impossible to implement all of the recommendations fully. Some recommendations will have to be postponed in favor of others and many will have to be implemented at less than the ideal level. Some recommendations will require staging over several years before they are fully implemented. Each recommendation in this report would then ultimately be either accepted and then implemented or rejected.

The "Classification of Recommendations" lists all the recommendations in Chapter Four. Each recommendation was reviewed and classified according to certain characteristics. The first column indicates whether or not that recommendation is both clearly stated and

reasonably well documented, an "x" in that column means it met those criteria. The next four columns cover possible content of each recommendation. The recommendation may be primarily for some kind of planning or evaluation, for doing something new in rehabilitation, for improving or increasing what is now done, or attempting to define or clarify some aspect of rehabilitation.

The next column indicates what agency or agencies are likely to be concerned with or involved in the implementation of that particular recommendation. Sometimes this is quite explicit in the recommendation but often these must be inferred. The agency primarily concerned is listed although others perhaps could also have been listed.

The next column indicates whether or not there would be a significant cost involved in implementing the recommendation. Wo attempt was made to estimate what that cost might be. The next column indicates whether additional information, documentation or data is needed in order to implement the recommendation. An "x" in the next column means that it would be possible to implement part or all of the recommendation now or in the very near future. This does not necessarily mean that the recommendation should or should not be implemented.

The next column indicates whether some kind of policy change or legislation would be necessary in order to implement the recommendation. The last three columns indicate an approximate rating or the level of concern or estimate of the importance of the issue covered in each recommendation as indicated by those participating in the recommendation – an "A" being the highest level of priority.

ABBREVIATIONS

The following abbreviations are used in the "Classification of Recommendations."

All Rehab - All public and private rehabilitation agencies

DVR - Minnesota Division of Vocational Rehabilitation

Gov. Council - Governor's Council on Health, Welfare and Rehabilitation

Health - State Department of Health

MARF - Minnesota Association of Rehabilitation Facilities

MSES - Minnesota State Employment Service

RSA - Rehabilitation Service Administration

SSB - State Services for the Blind

Voc Ed - Vocational Education

CLASSIFICATION OF RECOMMENDATIONS

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CHAPTER FIVE - THE COMPOSITE WORKING PLAN

This chapter, despite its title, is not a synthesis of the Statewide Comprehensive Plan for vocational rehabilitation services. The RSA guidelines were not followed for this section. It is instead largely a reiteration of several recommendations from the earlier chapter. Some additional information has been provided to give further emphasis and to elaborate some of the recommendations. There are no tables of projected need, estimated costs, or of present and proposed facilities. The chapter is divided into six sections; the authorship is unknown.

Information Systems. This brief section restates the need for some kind of statewide information system. A subcommittee of the statewide task force was appointed, met, deliberated and recommended that the State Planning Agency find or create "an organizational entity" to employ a group of people to develop and implement this information system. No other real direction is provided.

The document Employment Systems Planning is referred to but several of the points made there could well have been emphasized in this section, notably the need for comparability of data between agencies, the potential use of an information system as a tool for decision making at many levels and as a means for measuring the effectiveness of agencies and programs. Development of a truly useful information system is dependent on clearly defined programmatic objectives within the various agencies and programs to be included. The many reality constraints to developing a broad information system such as differing legal reporting requirements were not discussed but certainly would need to be considered in planning such a system.

Multi-Service Center. The recommendation for the establishment of some number of multi-service centers is developed in more detail than most of the recommendations. Four possible models of such a center are presented. This concept appears to be very popular and to have considerable support in that most of the regional committees also recommend some means of bringing together rehabilitation, welfare, employment, mental health and various other services. Developing and implementing such a plan will require considerable planning and perhaps should be started on a small scale pilot basis as is suggested in Chapter Four. The report suggests that the same entity to be used in developing the information system be used to establish and perhaps operate the multi-service centers.

Cooperative Programming and Third-Party Funding. This section elaborates on the recommendation #65 to study whether the total budget for cooperative services should be placed directly within the Division of Vocational Rehabilitation. Although the recommendation is for a study it is obvious from the supportive material with the recommendation and in this section that the study should result in a recommendation to the legislature that this placement of funds now in the budgets of schools, institutions, and special education be allocated directly to and controlled by DVR.

This would give DVR more freedom of action in deciding how and where to provide rehabilitation services. There are currently cooperative programs in 39 school settings and there are 10 programs in institutions. Other recommendations in Chapter Four strongly urge that these be increased. The shifting of allocations directly to DVR depends on the legislature's willingness to substantially raise both its complement of staff and its appropriation.

A caution is raised that these cooperative programs must not "obtain priority out of proportion to the overall general agency program". Without clearly established objectives and priorities regarding how, to whom and by whom rehabilitation services should be provided to best meet the needs of the people of Minnesota, it is premature to state such cautions. Indeed, it may be that such a shifting of resources to schools and institutional settings would be more consistent with overall objectives.

Services. In this section recommendations numbered 29, 38 and 39 are reemphasized. These refer to serving the ineligible, and providing follow-up services. It is not clear just how these and other recommendations regarding services interrelate. The discussion in this section may be indirectly raising the issue of just what the role of rehabilitation should be. Providing case management to applicants ineligible for services would probably place DVR in conflict with other agencies. Perhaps implementing the recommendation regarding multiservice centers would place DVR into a more practical relationship with other agencies, one which is complementary rather than competitive or controlling.

The emphasis given to more follow-up services and informational feedback for planning purposes is both clear and of unquestionable value.

Minnesota Plan for Rehabilitation Facilities. The planning staff and State Task Force decided to support the DVR developed "Revised Minnesota Plan for Facilities and Workshops" rather than developing an independent set of recommendations regarding facilities. That document might well have been used as a model for this planning effort in other areas because of its careful documentation of current resources, and its recommendations.

Who Should be Served. Although a State Task Force subcommittee was assigned this topic and some of the regional committees gave it considerable attention little is reported here. The clearest recommendation in this area is that the whole issue be resolved by the federal government.

The future of the cooperative programs with schools and institutions and of the multi-service centers will largely influence just who will be served by rehabilitation. The interrelatedness of all these issues in this chapter should have been more clearly stated.

CHAPTER SIX - CONTINUED PLANNING

Although it is very brief, this is perhaps the best section of the report. It is largely lifted from the West Metropolitan Region report. It does identify the necessary elements of planning and lists specifically what must be done for truly comprehensive vocational rehabilitation planning. Many of the shortcomings of the planning effort and final report that have been cited in this evaluation would be overcome if this chapter were heeded in future planning.

The first recommendation for continuing planning to be located with the State Planning agency would enable the effort to be really comprehensive, that is, to include not only the Division of Vocational Rehabilitation but Corrections, Welfare, Employment Security, Office of Economic Opportunity and others as well.

The alternate recommendation would facilitate planning within the Division of Vocational Rehabilitation but would probably not result in the kind of comprehensive planning that is felt to be needed.

Whatever subsequent plans are made regarding continuing planning they should take into account legislation pending in Washington, legislation which has come up since the final report was written. Some of this legislation is designed to develop a comprehensive manpower program which specifically includes vocational rehabilitation.

SUMMARY AND CONCLUSIONS

During the past two years the State of Minnesota has been involved in a comprehensive planning effort for vocational rehabilitation. An analysis of this effort and the final report it produced shows that the objectives for the effort were not clearly established. The functions and goals of the many persons, committees and task forces were never defined. Consequently, more was undertaken than could reasonably be accomplished within the time limits and with the structure that was set up. The data base for the recommendations is very poor and limited consideration was given to possible implementation strategies.

Regardless of these very substantial problems the efforts of many concerned citizens did produce some recommendations which if heeded would improve the services provided within rehabilitation. Secondly, the effort did generate considerable interest in large numbers of people who hopefully will continue to pursue the goal of improving rehabilitation in the years to come.

This planning effort should be considered as only the first step to a much more comprehensive and longer range effort. The lessons learned about planning should make future efforts that much more productive.